



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

RECEIVED
DHSS Breath Alcohol Program
By Carol Day at 7:37 am, Sep 03, 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 940096 F20712	DATE OF INSPECTION 8-30-09
LOCATION OF INSTRUMENT (STREET AND CITY) BATVAN-DWZ J P - POLK Co - BOYS RANCH	TIME OF INSPECTION 0233

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	

☒ TIME AND DATE **0235 08-30-09**

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2°C) **34°**

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 0.103	TEST 2 0.103	TEST 3 0.103
---------------------	---------------------	---------------------

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: **(DO NOT INCLUDE SIMULATOR TESTS)**

REFUSALS 0	(0-.04) 0	(.05-.09) 0	(.10-.14) 1	(.15-.19) 1	(Over .19) 0
-------------------	------------------	--------------------	--------------------	--------------------	---------------------

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Sent from GUTH LABORATORIES, INC. Lot # 08340, MFG DATE 10-15-08
EXP. DATE 10-15-09, BUT # 410

INSPECTING OFFICER	
SIGNATURE C.C. Meyer, CPL #914	PRINT NAME C.C. MEYER, CPL #914
TYPE II PERMIT NUMBER/EXPIRATION DATE 820205 06-25-10	TELEPHONE NUMBER 417-895-6868



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 940096
03/30/99

TESTING OFFICER:

MEYER/C/C
OFFICER I.D.:
PERMIT NUMBER: 820205
EXPIRATION DATE: 06/25/10
MISCELLANEOUS DATA:

--- SUPERVISOR MOIC ---

BLANK TEST	.000	02:39
INTERNAL STANDARD	VERIFIED	02:39
EXTERNAL STANDARD	.103	02:39
BLANK TEST	.000	02:40
EXTERNAL STANDARD	.103	02:41
BLANK TEST	.000	02:42
EXTERNAL STANDARD	.103	02:42
BLANK TEST	.000	02:42

N = 3
SIM. = .1
AVG. = .103

Operator Signature

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 940096
03/30/99
02:33

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2007): OKAY

HEATERS
SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

! " # \$ % & ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G
H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~

Operator Signature

2208-02

Face This Side Down -- This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 948896
08/30/09

ARREST TIME: 02:00

SUBJECT NAME:

RFU-TEST

DOB: 11/11/11 SEX: M

STATE D.L.: MO-120

ARRESTING OFFICER:

MEYER/C/C

OFFICER I.D.: 914

TESTING OFFICER:

SAME

OFFICER I.D.: SAME

PERMIT NUMBER: 328205

EXPIRATION DATE: 06/25/10

MISCELLANEOUS DATA:

BREATH ANALYSIS --

RADIO INTERFERENCE

Operator Signature

C. C. Meyer

2

Lab. 4 (R7-88)